



DECLARATION AND POWER OF ATTORNEY FOR ORIGINAL U.S. PATENT APPLICATION

#3

Attorney's Docket No. RECOP011

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **SYSTEM AND METHOD FOR DETECTING COMPUTER INTRUSIONS**, the specification of which,

(check one)

1. ☐ is attached hereto.
2. ☒ was filed on August 30, 2000 as
U.S. Application No. 09/651,439
and was amended on _____.
3. ☐ was filed on _____ as
International PCT Application No. _____
and was amended on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, CFR § 1.56.

I hereby claim foreign priority benefits under Title 35, United States code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Benefits Claimed?

(Appl. No.) (Country) (Filing Date)

☐ Yes ☐ No

(Appl. No.) (Country) (Filing Date)

☐ Yes ☐ No

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

Prior Provisional Application(s)

60/151,531 August 30, 1999
(Application No.) (Filing Date)

(Application No.) (Filing Date)

